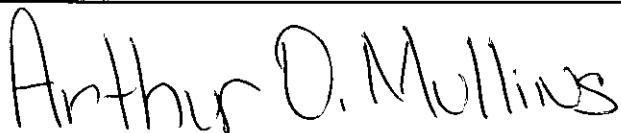


IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF MICHIGAN



(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

v.



(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case: 2:18-cv-11869
Judge: Tarnow, Arthur J.
MJ: Grand, David R.
Filed: 06-12-2018 At 04:12 PM
CMP MULLINS V. FORD MOTOR COMPANY (DA)

(to be filled in by the Clerk's Office)

Jury Trial: Yes No
(check one)

Complaint for Employment Discrimination

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Arthur O. Mullins
Street Address	17190 Stoepel
City and County	Detroit Wayne County
State and Zip Code	Michigan 48221
Telephone Number	(313) 704-1867
E-mail Address	iiiMC.Mullins@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	Ford Motor Company
Job or Title (if known)	
Street Address	3001 Miller Rd.
City and County	Dearborn Wayne County
State and Zip Code	Michigan 48120
Telephone Number	(800) 392-3673
E-mail Address (if known)	UNKNOWN

Defendant No. 2

Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	

Defendant No. 3

Name _____

Job or Title
(if known) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address
(if known) _____

Defendant No. 4

Name _____

Job or Title
(if known) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address
(if known) _____

C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is:

Name _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (*check all that apply*):

Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)

Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

Other federal law (*specify the federal law*):

Relevant state law (*specify, if known*):

Relevant city or county law (*specify, if known*):

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

- Failure to hire me.
- Termination of my employment.
- Failure to promote me.
- Failure to accommodate my disability.
- Unequal terms and conditions of my employment.
- Retaliation.
- Other acts (*specify*):

Forcibly Administering unnecessary medical attention and testing

(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

02/02/2018, 02/16/2018

C. I believe that defendant(s) (*check one*):

- is/are still committing these acts against me.
- is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

- race _____
- color _____
- gender/sex _____
- religion _____
- national origin _____
- age. My year of birth is _____. (*Give your year of birth only if you are asserting a claim of age discrimination.*)
- disability or perceived disability (*specify disability*)

Depression

E. The facts of my case are as follows. Attach additional pages if needed.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

E.

January 26, 2018, I cleared through Ford's DSP medical with instructions to report to Labor Relations for my new demoted work assignment, within Ford's DSP as a production employee. Labor Relations rep Bryan Butcher assigned me to DSP (west) production. Once at my assigned work station I requested that my UAW rep take me to Labor Relations, so I could file a formal complaint that is within my right as a member of the UAW and a Ford employee. The investigatory interview was conducted in Labor Relations by Labor Relations rep Bryan Butcher. While making my formal complaint I referenced Bryan Butcher as part of my complaint. One week later 02/02/2018 not only had my complaint not been addressed, but the harassment and retaliation continued. *** (Investigatory Interview Document evidence available upon request) ***

February 2, 2018, I requested the UAW once again take me to Labor Relations to file yet another complaint. This investigatory interview was also, and once again held by Labor Relations rep Bryan Butcher. This time Mr. Butcher was very rude, abrasive, and threatening during the entire interview. Mr. Butcher tried to force me into signing a false statement with intimidation and threats. During the interview my UAW rep stepped out of the office where the interview was taking place. Mr. Butcher and I sat in complete silence while the UAW rep was out of the office. Mr. Butcher also stepped out of the office momentarily. After Mr. Butcher retrieved the false statement from the copy machine he reentered the office and continued the interview. While conducting the interview Mr. Butcher requested that the UAW rep return into the office, so he could witness me refusing to sign the partial / incomplete / false statement. Once I refused to sign the erroneous document Mr. Butcher took advantage of one moment when we were left alone to attack my job. Mr. Butcher stood up and yelled to the UAW rep Arthur threatened me!!!! Mr. Butcher told the UAW rep that while he was out of the office Arthur said "F%*#k You B#!%*H" and I was suspended indefinitely starting immediately. Although the UAW rep proclaimed my innocence stating, "That's Bull\$#!t I'm 5 feet from the door" This was my official last day of work to date.

*** (Audio Evidence marked Bryan Butcher Lie dated 02/02/2018) ***

February 9, 2018, I reported to Labor Relations office under the instruction of Labor Relations rep Bryan Butcher. I was told by Mr. Butcher that I was being disciplined for inappropriate behavior. I was also told by Mr. Butcher that I must bring my employee badge to the Labor Relations office, so he could run a series of test to ensure my badge is working properly. I was also told any time before my return I'm to take a standard fit for duty (FFD). Ford Motor Company's drug and alcohol screening administered in Ford's DSP (east) medical. Mr. Butcher said the two tasks must be completed before returning to work. Return date after two-week suspension 02/17/2018.

*** (February 14, 2018 I filed a formal complaint with the EEOC about the ongoing discrimination and harassment that I was being subjected to. Evidence document Charge of Discrimination dated 02/14/2018) ***

February 16, 2018 My UAW rep told me to report to Ford Motor Company's Labor Relation Bryan Butcher's office immediately. When I arrived my UAW rep and Mr. Butcher tested my employee ID. The defect required that I replace my ID. Mr. Butcher printed the required documents needed a new ID. I then started the process to complete the (FFD) Fit for Duty mandated. However, I was unsuccessful due to fact the DSP (east) medical nurse was instructed to not administer testing. Shortly after I reported to the DSP UAW committee room. UAW President Byrd called Labor Relations and spoke to Labor Relations rep Bryan Butcher confirming that I am to report to DSP (east) medical for a (FFD) Fit for Duty. If DSP (east) medical for any reason was unable to complete the (FFD) Fit for Duty; I was to then report to gate 4 medical to see Ford's head nurse Ms. Gail for (FFD) Fit for Duty. Once it was brought to Mr. Butcher's attention that I had yet to complete my standard (FFD) Fit for Duty. Mr. Butcher continued his retaliation tactics by sending emails to DSP (east) medical building instructing them to change my standard (FFD) drug and alcohol screening to a (IME) Independent Medical Examination; psychiatric evaluation. President H. Byrd then called me a shuttle and instructed me to

report to gate 4 immediately. Upon arriving to gate 4 medical I overheard and recorded a conversation

E. (cont)

report to gate 4 immediately. Upon arriving to gate 4 medical I overheard and recorded a conversation between Ford's head nurse Ms. Gail and Labor Relations, conspiring to trick me into signing documents stating that I needed a (IME) Independent Medical Examination; psychiatric evaluation. Nurse Gail is in audio evidence saying "He has no reason to even be here. "This email doesn't say anything about a (IME)" "you're going to send me something to make this carry weight?!" Almost immediately after leaving medical gate 4 I was picked up by Ford security and escorted off Ford Motor Company property. I recorded the security guard stating that he appreciated my polite professional cooperation. He stated that Labor Relations requested him to immediately remove me from Ford property since I am currently suspended and not supposed to be on grounds. *** (Audio evidence from UAW President H. Byrd, Labor Relations Bryan Butcher, Gate 4 Medical Ford's head nurse Ms. Gail. All conspired together in retaliation conspiracy against Ford Employee Arthur O. Mullins) *** *** (Security Guard evidence available upon request) *** *** (February 20, 2018 I filed second complaint with EEOC concerning the ongoing discrimination, harassment, and now retaliation that I was enduring Evidence document Charge Of Discrimination dated 02/20/2018) ***

March 5, 2018, I received Express Priority Mail from Ford Motor Company Labor Relations (unsigned) instructing me to report and complete a (IME) Independent Medical Examination. The examination would have to be completed before I would be allowed to return to work. However, after completing the full 5-hour examination March 13, 2018 I have yet to be contacted by Labor Relations or the UAW. I am no longer suspended, nor am I on any type of medical leave to date. *** (Evidence Document available upon request) ***

Thank You in Advance, Arthur O. Mullins

IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

02/20/2018

B. The Equal Employment Opportunity Commission (check one):

has not issued a Notice of Right to Sue letter.
 issued a Notice of Right to Sue letter, which I received on (date)

03/15/2018

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

60 days or more have elapsed.
 less than 60 days have elapsed.

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Attach additional pages if needed.

See Next Page.

V. Relief

The defendant has and is currently acting in bad faith. The defendant turned a blind eye to irrefutable evidence abusing the power that their individual positions hold. Full of malice the defendants have breached the plaintiffs contract and violated rights that are protected by said contract. The defendant has defrauded the plaintiff using reckless and outrageous tactics to oppress his financial and career growth. Subsequently the defendants wicked wanton behavior has caused ripples that would change the plaintiffs life and the lives of the plaintiffs forever.

- **Loss Wages
- **Retirement
- **Children
- **Debt
- **Depression
- **Medicated
- **Therapy
- **Mental Anguish
- **Pain & Suffering
- **Defamation of character

**Total 50,000,000

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

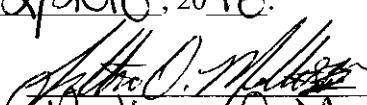
A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 06/12/2018, 2018.

Signature of Plaintiff

Printed Name of Plaintiff



Arthur O. Mullins

Additional Information:

DISMISSAL AND NOTICE OF RIGHTS

To: **Arthur Mullins**
17190 Stoepel
Detroit, MI 48221

From: **Detroit Field Office**
477 Michigan Avenue
Room 865
Detroit, MI 48226



*On behalf of person(s) aggrieved whose identity is
 CONFIDENTIAL (29 CFR §1601.7(a))*

EEOC Charge No.

EEOC Representative

Telephone No.

471-2018-01877**Colleen M. O'Brien,
 Investigator****(313) 226-2361**

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

- The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.
- Your allegations did not involve a disability as defined by the Americans With Disabilities Act.
- The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.
- Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge
- The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.
- The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.
- Other (briefly state)

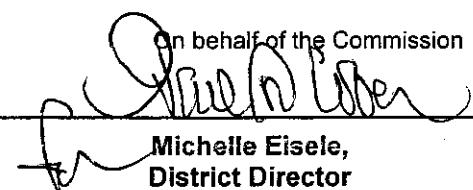
- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

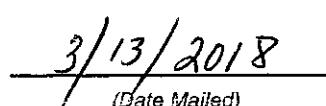
Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible**.

On behalf of the Commission



Michelle Eisele,
 District Director

Enclosures(s)



3/13/2018
 (Date Mailed)

cc:

Suzie Furton
Equal Employment Planning
FORD MOTOR COMPANY
World Headquarters, Rm 0124-E-1
Dearborn, MI 48126

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

 FEPA
 EEOC

471-2018-01877

Michigan Department Of Civil Rights

State or local Agency, if any

and EEOC

Name (indicate Mr., Ms., Mrs.)

Mr. Arthur Mullins

Home Phone (Incl. Area Code)
(313) 704-7867

Date of Birth

Street Address

City, State and ZIP Code

17190 Stoepel, Detroit, MI 48221

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name

FORD MOTOR COMPANY

No. Employees, Members
500 or MorePhone No. (Include Area Code)
(313) 390-1218

Street Address

City, State and ZIP Code

One American Road Room 125-A2, Dearborn, MI 48126

RECEIVED

Name

No. Employees, Members
FEB 20 2018
Phone No. (Include Area Code)

Street Address

City, State and ZIP Code

U.S. EEOC
Detroit Field Office

DISCRIMINATION BASED ON (Check appropriate box(es).)

RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY GENETIC INFORMATION
 OTHER (Specify)

DATE(S) DISCRIMINATION TOOK PLACE

Earliest

Latest

02-16-2018

02-16-2018

 CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s).)

I began my employment with the above-named employer on or about March 16, 2015, and am currently employed as a Hi-Lo Driver/Production employee.

On or about February 14, 2018, I filed EEOC charge 471-2018-01780 against the above-named employer. On or about February 16, 2018, I returned to work for a fitness for duty exam. Labor Relations began sending emails to medical department employees instructing them not to complete my exam. I was informed I need to undergo a psychiatrist fitness for duty exam prior to returning to work. This was not a condition of me returning to work prior to filing EEOC Charge 471-2018-01780.

I believe I am being subjected to different terms and conditions of employment and subjected to an impermissible medical inquiry, in retaliation for filing EEOC Charge 471-2018-01780 and because I am being regarded as disabled, in violation of Title VII of the Civil Rights Act of 1964, as amended and the Americans with Disabilities Act of 1990, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.
 SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
 (month, day, year)

Feb 20, 2018

Charging Party Signature

Date

John B. Mullins
2/20/18

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS		DEFENDANTS																																																																																																																															
<p><i>Mullins, Arthur O</i></p> <p><i>Wayne County</i></p> <p><i>7190 Stoepel Detroit, Michigan 48221</i></p> <p>(b) County of Residence of First Listed Plaintiff (EXCEPT IN U.S. PLAINTIFF CASES)</p> <p>(c) Attorneys (Firm Name, Address, and Telephone Number)</p> <p><i>-DNA-</i></p>		<p><i>Company, Ford Motor</i></p> <p><i>Wayne County</i></p> <p>County of Residence of First Listed Defendant (IN U.S. PLAINTIFF CASES ONLY)</p> <p>Case: 2:18-cv-11869 Judge: Tarnow, Arthur J. MJ: Grand, David R. Filed: 06-12-2018 At 04:12 PM CMP MULLINS V. FORD MOTOR COMPANY (DA)</p>																																																																																																																															
II. BASIS OF JURISDICTION (Place an "X" in One Box Only)		III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)																																																																																																																															
<input type="checkbox"/> 1 U.S. Government Plaintiff <input checked="" type="checkbox"/> 3 Federal Question (U.S. Government Not a Party)		PTF DEF <input checked="" type="checkbox"/> 1 Citizen of This State <input type="checkbox"/> 1 Incorporated or Principal Place of Business In This State <input type="checkbox"/> 2 Citizen of Another State <input type="checkbox"/> 2 Incorporated and Principal Place of Business In Another State <input type="checkbox"/> 3 Citizen or Subject of a Foreign Country <input type="checkbox"/> 3 Foreign Nation																																																																																																																															
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<table border="1"> <tr> <td colspan="2">CONTRACT</td> <td colspan="2">TORTS</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise </td> <td colspan="2"> <input type="checkbox"/> PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property </td> <td colspan="2"> <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/ Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/ Accommodations <input type="checkbox"/> 445 Amer. w/ Disabilities - Employment <input type="checkbox"/> 446 Amer. w/ Disabilities - Other <input type="checkbox"/> 448 Education </td> <td colspan="2"> <input type="checkbox"/> Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <input type="checkbox"/> Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement </td> </tr> <tr> <td colspan="4"> <table border="1"> <tr> <td colspan="2">FORFEITURE/PENALTY</td> <td colspan="2">BANKRUPTCY</td> <td colspan="2">OTHER STATUTES</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other </td> <td colspan="2"> <input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 </td> <td colspan="2"> <input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/ Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation </td> <td colspan="2"> <input type="checkbox"/> 861 HIA (1395ft) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) </td> <td colspan="2"> <input type="checkbox"/> 800 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609 </td> <td colspan="2"> <input type="checkbox"/> 861 HIA (1395ft) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) </td> <td colspan="2"> <input type="checkbox"/> 800 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision </td> <td colspan="2"> <input type="checkbox"/> 861 HIA (1395ft) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) </td> <td colspan="2"> <input type="checkbox"/> 800 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - 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PURSUANT TO LOCAL RULE 83.11

1. Is this a case that has been previously dismissed?

<input type="checkbox"/>	Yes
<input checked="" type="checkbox"/>	No

• If yes, give the following information:

Court: _____

Case No.: _____

Judge: _____

2. Other than stated above, are there any pending or previously discontinued or dismissed companion cases in this or any other court, including state court? (Companion cases are matters in which it appears substantially similar evidence will be offered or the same or related parties are present and the cases arise out of the same transaction or occurrence.)

<input type="checkbox"/>	Yes
<input checked="" type="checkbox"/>	No

If yes, give the following information:

Court: _____

Case No.: _____

Judge: _____

Notes :
